

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2021

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SCHOOL 'S OUT WASHINGTON			D Employer identification number 46-0809713
	Doing Business As			
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	
	801 23RD AVENUE SOUTH STE A			
City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 98144				E Telephone number (206) 323-2369
F Name and address of principal officer: ELIZABETH WHITFORD 801 23RD AVENUE SOUTH STE A, SEATTLE, WA 98144			G Gross receipts \$ 14,851,653.	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
J Website: WWW.SCHOOLSOUTWASHINGTON.ORG			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 2012 M State of legal domicile: WA	
H(c) Group exemption number ▶				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SCHOOL 'S OUT WASHINGTON PROVIDES SERVICES AND GUIDANCE FOR ORGANIZATIONS TO ENSURE ALL YOUNG PEOPLE HAVE SAFE PLACES TO LEARN AND GROW WHEN NOT IN SCHOOL. SOWA IS DEDICATED TO		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	68
	6 Total number of volunteers (estimate if necessary)	6	12
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	17,925,256.	14,574,931.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	195,380.	268,443.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,553.	8,279.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	NONE	NONE
		18,132,189.	14,851,653.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	14,146,854.	9,853,156.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	NONE	NONE
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,974,681.	3,119,593.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	10,260.	NONE
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 125,933.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,415,402.	1,627,718.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,547,197.	14,600,467.
19 Revenue less expenses. Subtract line 18 from line 12	-415,008.	251,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	6,284,439.	3,667,281.
	22 Net assets or fund balances. Subtract line 21 from line 20	3,335,873.	467,689.
	2,948,566.	3,199,592.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	09/06/2022		
	ELIZABETH WHITFORD Type or print name and title	Date		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	MATTHEW FRERKER	MATTHEW FRERKER	09/06/2022	P01677675
	Firm's name ▶ BDO USA, LLP	Firm's EIN ▶	13-5381590	
	Firm's address ▶ 601 UNION STREET, SUITE 2300 SEATTLE, WA 98101	Phone no.	206-382-7777	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

SCHOOL'S OUT WASHINGTON PROVIDES SERVICES AND GUIDANCE FOR ORGANIZATIONS TO ENSURE ALL YOUNG PEOPLE HAVE SAFE PLACES TO LEARN AND GROW WHEN NOT IN SCHOOL. SOWA IS DEDICATED TO BUILDING COMMUNITY SYSTEMS TO SUPPORT QUALITY AFTERSCHOOL, YOUTH DEVELOPMENT AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,254,851. including grants of \$ 19,000.) (Revenue \$ 91,732.)

THE STATEWIDE PROGRAM QUALITY INITIATIVE WORKS TO ENSURE THAT AFTERSCHOOL AND YOUTH DEVELOPMENT PROGRAMS MEET HIGH QUALITY STANDARDS OF PRACTICE THROUGH ASSESSMENT, TRAINING, COACHING AND CAPACITY BUILDING.

4b (Code:) (Expenses \$ 10,440,737. including grants of \$ 9,825,936.) (Revenue \$)

OUR GRANTMAKING PROGRAM SUPPORTS EXPANDED LEARNING OPPORTUNITIES THROUGHOUT THE STATE. CURRENTLY, WE PROVIDE GRANTS IN THE SUMMER WITH OUR FEED YOUR BRAIN GRANT; THROUGHOUT THE SCHOOL YEAR FOR SUPPORTING FIRST YEAR REFUGEE YOUTH WITH OUR REFUGEE SCHOOL IMPACT PROGRAM; AND IN KING COUNTY THROUGH THE BEST STARTS FOR KIDS OUT OF SCHOOL TIME PROGRAM. IN 2021 WE ALSO PROVIDED GRANTS THROUGHOUT THE STATE THROUGH THE WASHINGTON YOUTH DEVELOPMENT NONPROFIT RELIEF FUND.

4c (Code:) (Expenses \$ 1,816,830. including grants of \$) (Revenue \$ 129,341.)

SCHOOL'S OUT WASHINGTON IS AN INTERMEDIARY ORGANIZATION WORKING TO ENSURE ALL YOUTH HAVE SAFE PLACES TO LEARN AND GROW WHEN NOT IN SCHOOL. WE DO NOT DIRECTLY SERVE YOUTH, BUT INSTEAD PROVIDE AFTERSCHOOL AND YOUTH DEVELOPMENT PROVIDERS, COMMUNITIES, AND DECISION MAKERS WITH THE RESOURCES, TOOLS, SKILLS, AND KNOWLEDGE THEY NEED TO SUPPORT YOUTH IN ACHIEVING POSITIVE OUTCOMES IN SCHOOL AND IN LIFE.

4d Other program services (Describe on Schedule O.)

(Expenses \$ 514,974. including grants of \$ 325.) (Revenue \$ 47,370.)

4e Total program service expenses 14,027,392.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	<input checked="" type="checkbox"/>	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	<input checked="" type="checkbox"/>	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		<input checked="" type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V.</i>		<input checked="" type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	<input checked="" type="checkbox"/>	
b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		<input checked="" type="checkbox"/>
c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	<input checked="" type="checkbox"/>	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>		<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	<input checked="" type="checkbox"/>	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?.		<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>		<input checked="" type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>		<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>		<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	<input checked="" type="checkbox"/>	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Question text, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question number, Question text, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Yes No

Table with 3 main columns: Question/Description, Yes, No. Rows include 2a (68 employees), 2b (federal employment tax returns), 3a (unrelated business gross income), 3b (Form 990-T), 4a (foreign financial accounts), 5a (prohibited tax shelter), 6a (charitable contributions), 7 (organizations receiving deductible contributions), 8 (sponsoring organizations), 9 (sponsoring organizations), 10 (Section 501(c)(7) organizations), 11 (Section 501(c)(12) organizations), 12a (Section 4947(a)(1) trusts), 13 (Section 501(c)(29) health insurance issuers), 14a (indoor tanning services), 15 (Section 4960 tax), 16 (Section 4968 excise tax), 17 (Section 501(c)(21) organizations).

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with columns for line numbers (1a, 1b, 2-9), Yes, and No. Contains questions about governing body members, relationships, and documentation.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with columns for line numbers (10a-16b), Yes, and No. Contains questions about local chapters, conflict of interest policies, whistleblower policies, and compensation reviews.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

ELIZABETH WHITFORD 801 23RD AVENUE SOUTH STE A SEATTLE, WA 98144
206-323-2396

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ELIZABETH WHITFORD CEO	40.00 NONE			X				135,123.	NONE	10,149.
(2) LIZ DIRECTOR DIRECTOR OF FA	40.00 NONE			X				100,603.	NONE	7,903.
(3) SCOTT CALDWELL PRESIDENT	4.00 NONE	X		X				NONE	NONE	NONE
(4) STEPHANIE THOMSEN TREASURER	2.00 NONE	X		X				NONE	NONE	NONE
(5) CEIL ERICKSON SECRETARY	2.00 NONE	X		X				NONE	NONE	NONE
(6) SUKHI DHALIWAL VICE PRESIDENT	2.00 NONE	X		X				NONE	NONE	NONE
(7) MAURICIO MAJANO BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE
(8) JANICE D'AMATO BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE
(9) DAISY CATAGUE BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE
(10) JIM PUGEL BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE
(11) JODY ROSENTSWIEG BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE
(12) NICOLE YOHALEM BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE
(13) AMBER ORTIZ-DIAZ BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE
(14) MUSTAFA BULALE BOARD MEMBER	2.00 NONE	X						NONE	NONE	NONE

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 30,000.					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e 13,753,993.					
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f 790,938.					
	g	Noncash contributions included in lines 1a-1f	1g \$					
	h	Total. Add lines 1a-1f ▶		14,574,931.				
	Program Service Revenue	2a	PROGRAM FEES	Business Code 611710	268,443.	268,443.		
b								
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f ▶		268,443.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		8,279.			8,279.	
	4	Income from investment of tax-exempt bond proceeds . ▶		NONE				
	5	Royalties ▶		NONE				
	6a	Gross rents	(i) Real	(ii) Personal				
			6a					
			6b					
	b	Less: rental expenses	6b					
	c	Rental income or (loss)	6c	NONE	NONE			
	d	Net rental income or (loss) ▶			NONE			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			7a					
			7b					
	b	Less: cost or other basis and sales expenses . .	7b					
	c	Gain or (loss)	7c					
	d	Net gain or (loss) ▶			NONE			
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18							
		8a	NONE					
		8b	NONE					
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events ▶			NONE				
9a	Gross income from gaming activities. See Part IV, line 19							
		9a	NONE					
		9b	NONE					
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities ▶			NONE				
10a	Gross sales of inventory, less returns and allowances							
		10a	NONE					
		10b	NONE					
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory ▶			NONE				
Miscellaneous Revenue	11a		Business Code					
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d ▶			NONE			
12	Total revenue. See instructions ▶			14,851,653.	268,443.		8,279.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Payroll taxes, and Total functional expenses.

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	497,687.	1	210,502.
	2 Savings and temporary cash investments	3,073,871.	2	2,179,220.
	3 Pledges and grants receivable, net	2,656,788.	3	1,193,956.
	4 Accounts receivable, net	22,679.	4	50,971.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	5	NONE
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
	7 Notes and loans receivable, net	NONE	7	NONE
	8 Inventories for sale or use	NONE	8	NONE
	9 Prepaid expenses and deferred charges	19,039.	9	11,992.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 33,366.		
	b Less: accumulated depreciation	10b 33,365.		
		1,814.	10c	1.
	11 Investments - publicly traded securities	NONE	11	NONE
	12 Investments - other securities. See Part IV, line 11	NONE	12	NONE
	13 Investments - program-related. See Part IV, line 11	NONE	13	NONE
	14 Intangible assets	NONE	14	NONE
15 Other assets. See Part IV, line 11	12,561.	15	20,639.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	6,284,439.	16	3,667,281.	
Liabilities	17 Accounts payable and accrued expenses	438,867.	17	376,612.
	18 Grants payable	456,000.	18	NONE
	19 Deferred revenue	NONE	19	NONE
	20 Tax-exempt bond liabilities	NONE	20	NONE
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	22	NONE
	23 Secured mortgages and notes payable to unrelated third parties	NONE	23	NONE
	24 Unsecured notes and loans payable to unrelated third parties	607,700.	24	NONE
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,833,306.	25	91,077.
	26 Total liabilities. Add lines 17 through 25	3,335,873.	26	467,689.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	245,814.	27	1,355,110.
	28 Net assets with donor restrictions	2,702,752.	28	1,844,482.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	2,948,566.	32	3,199,592.
33 Total liabilities and net assets/fund balances	6,284,439.	33	3,667,281.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,851,653.
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,600,467.
3	Revenue less expenses. Subtract line 2 from line 1	3	251,186.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,948,566.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-160.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3,199,592.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII.

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

SCHOOL'S OUT WASHINGTON

Employer identification number

46-0809713

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990) 2021

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6,028,826.	7,711,620.	7,853,850.	17,925,256.	14,574,931.	54,094,483.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3 The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4 Total. Add lines 1 through 3.	6,028,826.	7,711,620.	7,853,850.	17,925,256.	14,574,931.	54,094,483.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						2,344,788.
6 Public support. Subtract line 5 from line 4						51,749,695.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	6,028,826.	7,711,620.	7,853,850.	17,925,256.	14,574,931.	54,094,483.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,279.	4,161.	14,574.	11,553.	8,279.	41,846.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						NONE
11 Total support. Add lines 7 through 10						54,136,329.
12 Gross receipts from related activities, etc. (see instructions)					12	1,862,137.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	95.59 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	90.37 %
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization.		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
 If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)).	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
e	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
c	Excess from 2019			
d	Excess from 2020			
e	Excess from 2021			

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990 or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

Name of the organization

Employer identification number

SCHOOL'S OUT WASHINGTON

46-0809713

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization <p style="text-align: center;">SCHOOL'S OUT WASHINGTON</p>	Employer identification number <p style="text-align: center;">46-0809713</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A <hr/> <hr/>	\$ 5,044,857.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A <hr/> <hr/>	\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A <hr/> <hr/>	\$ 1,250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A <hr/> <hr/>	\$ 596,737.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A <hr/> <hr/>	\$ 357,965.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	N/A <hr/> <hr/>	\$ 1,207,495.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

SCHOOL'S OUT WASHINGTON

Employer identification number

46-0809713

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	N/A _____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization <p style="text-align: center;">SCHOOL'S OUT WASHINGTON</p>	Employer identification number <p style="text-align: center;">46-0809713</p>
--	---

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization SCHOOL'S OUT WASHINGTON	Employer identification number 46-0809713
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions ▶ \$ _____
- 3 Volunteer hours for political campaign activities. See instructions

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2021

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; a Volunteers?; b Paid staff or management...; c Media advertisements?; d Mailings to members...; e Publications...; f Grants to other organizations...; g Direct contact with legislators...; h Rallies, demonstrations...; i Other activities?; j Total...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; b If "Yes," enter the amount of any tax incurred under section 4912...; c If "Yes," enter the amount of any tax incurred by organization managers...; d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?...

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?...

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 main columns: Description and Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); a Current year; b Carryover from last year; c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures. See instructions.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by the instructions.

Part IV Supplemental Information (continued)

POLITICAL ACTIVITIES

MET WITH LOCAL REPRESENTATIVES AND COALITIONS TO DISCUSS AND FURTHER
EXPANDED LEARNING OPPORTUNITIES AND ENCOURAGE GOVERNMENT INVOLVEMENT AND
FUNDING AT THE NATIONAL, STATE, LOCAL LEVEL.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2021

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

SCHOOL'S OUT WASHINGTON

46-0809713

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Line number, Description, and Held at the End of the Tax Year. Includes questions about purpose of easements, total number, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, and Amount. Includes questions about reporting art and historical treasures.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2021

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ _____%
 - b Permanent endowment ▶ _____%
 - c Term endowment ▶ _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		4,966.	4,966.	NONE
d Equipment		28,400.	28,399.	1.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) . ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) REFUNDABLE ADVANCE	91,077.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Part XIII Supplemental Information *(continued)*

OTH AMTS INCLUDED IN FINANCIALS NOT IN THE RETURN EXPENSE

LOSSES ON UNCOLLECTIBLE PLEDGES: \$160

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

SCHOOL'S OUT WASHINGTON

Employer identification number

46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) A NEW START IN LIFE 2625 W BRUNEAU PL STE C	83-1885578	501(C)(3)	46,000.				WYDNRF
(2) ACCOUNTING CAREER AWARENESS PROGRAM PO BOX 22066 SEATTLE, WA 98122-0066	91-1963091	501(C)(3)	22,000.				WYDNRF
(3) ACT SIX 111 UNIVERSITY PKWY STE 102	20-0697012	501(C)(3)	46,000.				WYDNRF
(4) AFRICAN COMMUNITY HOUSING & DEVELOPMENT 16256 MILITARY RD S STE 206	83-1665288	501(C)(3)	10,000.				OSPISF
(5) AFRICAN YOUNG DREAMERS EMPOWERMENT PROGRA 2001 6TH AVE STE 2600	81-1635515	501(C)(3)	21,000.				WYDNRF
(6) AI-TAIWAN 28815 PACIFIC HWY S STE 7A	82-0785167	501(C)(3)	57,249.				BSK
(7) AI-TAIWAN - WAPI COMMUNITY SERVICES 28815 PACIFIC HWY S STE 7A	91-1586900	501(C)(3)	57,249.				BSK
(8) ALL GIRL EVERYTHING ULTIMATE PROGRAM (AGE 3801 BEACON AVE S SEATTLE, WA 98108-1520	47-4257834	501(C)(3)	18,000.				OSPISF
(9) ALL IN OUTREACH AND MENTORING 1032 EDMONDS AVE NE RENTON, WA 98056-2920	91-0890111	501(C)(3)	10,000.				OSPISF
(10) ALPHA KAPPA ALPHA SORORITY, INC. - ZETA O PO BOX 111072 TACOMA, WA 98411-1072	26-1384277	501(C)(3)	13,000.				WYDNRF
(11) AMERICAN YOUTH FOOTBALL 12310 HIGHWAY 99 STE 119	82-3066054	501(C)(3)	19,000.				WYDNRF
(12) ARTS CORPS 4408 DELRIDGE WAY SW STE 110	91-2044679	501(C)(3)	157,973.				BSK

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 294

3 Enter total number of other organizations listed in the line 1 table ▶ 29

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

SCHOOL'S OUT WASHINGTON

Employer identification number

46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ARTS IMPACT 4052 SW COLLEGE ST SEATTLE, WA 98116-2035	83-4390508	501(C)(3)	30,000.				WYDNRF
(2) ASIA PACIFIC CULTURAL CENTER 4851 SOUTH TACOMA WAY TACOMA, WA 98409-4446	91-1854410	501(C)(3)	55,000.				OSPISF
(3) ASSOCIATED RECREATION COUNCIL - BALLARD 8061 DENSMORE AVE N SEATTLE, WA 98103-4436	51-0170717	501(C)(3)	30,000.				WYDNRF
(4) ASTER BLOSSOM CHILDCARE 3201 E REPUBLICAN ST SEATTLE, WA 98112-4215	80-0101206	501(C)(3)	25,000.				OSPISF
(5) ATLANTIC STREET CENTER 2103 S ATLANTIC ST SEATTLE, WA 98144-3615	91-0568710	501(C)(3)	20,600.				WYDNRF
(6) AUBURN SCHOOL DISTRICT 915 4TH ST NE AUBURN, WA 98002-4499	91-6001640	GOVERNMENT	150,543.				BSK, RSIP
(7) BELLEVUE SCHOOL DISTRICT NO. 405 PO BOX 90010 BELLEVUE, WA 98009-9010	91-6001637	MUNICIPAL C	57,773.				BSK
(8) BELLINGHAM GIRLS ROCK CAMP PO BOX 2031 BELLINGHAM, WA 98227-2031	47-2337584	501(C)(3)	7,000.				WYDNRF
(9) BIG BROTHERS BIG SISTERS OF ISLAND COUNTY 913 E WHIDBEY AVE OAK HARBOR, WA 98277-2674	91-1877376	501(C)(3)	11,000.				WYDNRF
(10) BIG BROTHERS BIG SISTERS OF PUGET SOUND 1600 S GRAHAM ST SEATTLE, WA 98108-2821	91-0673185	501(C)(3)	20,000.				WYDNRF
(11) BIG BROTHERS BIG SISTERS OF SNOHOMISH CO 4730 COLBY AVE EVERETT, WA 98203-2927	91-0565561	501(C)(3)	19,000.				WYDNRF
(12) BIG BROTHERS BIG SISTERS OF SW WA 2424 HERITAGE CT SW STE 302	91-1225443	501(C)(3)	38,000.				WYDNRF

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

SCHOOL'S OUT WASHINGTON

Employer identification number

46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) BIG HOMIES MINISTRIES INTERNATIONAL 513 110TH STREET CT E APT M205	47-1354491	501(C)(3)	15,000.				OSPISF
(2) BLUE MOUNTAIN ACTION COUNCIL 8 E CHERRY ST WALLA WALLA, WA 99362-1946	91-0793597	501(C)(3)	23,000.				OSPISF
(3) BOYS & GIRLS CLUBS OF BELLEVUE 209 100TH AVE NE BELLEVUE, WA 98004-5625	91-0776451	501(C)(3)	275,444.				BSK, WYDNRF, HELO
(4) BOYS & GIRLS CLUBS OF BENTON & FRANKLIN PO BOX 1322 PASCO, WA 99301-1219	91-1673327	501(C)(3)	71,000.				OSPISF, WYDNRF
(5) BOYS & GIRLS CLUBS OF S PUGET SOUND 3875 S 66TH ST STE 101	91-0759832	501(C)(3)	45,000.				WYDNRF
(6) BOYS & GIRLS CLUBS OF SKAGIT COUNTY 1605 WILLIAM WAY STE B	91-1670669	501(C)(3)	19,000.				WYDNRF
(7) BOYS & GIRLS CLUBS OF SNOHOMISH COUNTY 8223 BROADWAY STE 100	91-0549511	501(C)(3)	49,000.				OSPISF, WYDNRF
(8) BOYS & GIRLS CLUBS OF SPOKANE COUNTY 544 E PROVIDENCE AVE SPOKANE, WA 99207-1874	91-1983357	501(C)(3)	20,000.				OSPISF
(9) BOYS & GIRLS CLUBS OF THE OLYMPIC PENIN 400 W FIR ST SEQUIM, WA 98382-3326	91-1376766	501(C)(3)	25,000.				OSPISF
(10) BRAIDED SEEDS PO BOX 58512 TUKWILA, WA 98138-1512	85-2607807	501(C)(3)	10,000.				OSPISF
(11) BRAVE - INSPIRATIONAL WORKSHOPS 10210 SE 239TH ST APT 8 KENT, WA 98031-3380	82-4494610	501(C)(3)	30,000.				WYDNRF
(12) BUCKLEY YOUTH ACTIVITY CENTER PO BOX 1960 BUCKLEY, WA 98321-1960	26-3210559	501(C)(3)	12,000.				WYDNRF

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

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Name of the organization

Employer identification number

SCHOOL'S OUT WASHINGTON

46-0809713

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CAIR OF WASHINGTON STATE 1511 3RD AVE STE 701 SEATTLE, WA 98101-3647	68-0547353	501(C)(3)	10,000.				WYDNRF
(2) CAMP FIRE USA NCW COUNCIL PO BOX 1734 WENATCHEE, WA 98807-1734	91-0662881	501(C)(3)	24,000.				WYDNRF
(3) CAMP FIRE USA ORCA COUNCIL 622 TACOMA AVE S STE 3	91-0564955	501(C)(3)	40,000.				WYDNRF
(4) CAMP KOREY 19031 33RD AVE W STE 211	20-3829742	501(C)(3)	30,000.				WYDNRF
(5) CEDARBROOK EARLY LEARNING CENTER 461 KENNEDY RD PORT HADLOCK, WA 98339-9719	47-2330903	501(C)(3)	21,000.				WYDNRF
(6) CENTRO CULTURAL MEXICANO 7945 GILMAN ST REDMOND, WA 98052-3839	83-3001688	501(C)(3)	10,000.				WYDNRF
(7) CENTRO RENDU OF ST VINCENT DE PAUL 5950 4TH AVE S SEATTLE, WA 98108-3208	91-0583891	501(C)(3)	60,330.				BSK
(8) CENTRUM FOUNDATION 223 BATTERY WAY	23-7348302	C CORPORATI	16,000.				WYDNRF
(9) CHELAN TEEN CENTER DBA THRIVE CHELAN VALL PO BOX 3051 CHELAN, WA 98816-3051	91-2094856	501(C)(3)	12,000.				WYDNRF
(10) CHILDREN OF THE VALLEY AFTER SCHOOL PROGR 1318 S 18TH ST MOUNT VERNON, WA 98274-6028	26-2867395	501(C)(3)	15,000.				WYDNRF
(11) CHILDREN'S DEVELOPMENTAL CENTER 1549 GEORGIA AVE RICHLAND, WA 99352-4756	91-0876634	501(C)(3)	18,000.				WYDNRF
(12) CHILDREN'S HOME SOCIETY OF WASHINGTON 12360 LAKE CITY WAY NE STE 450	91-0575955	501(C)(3)	60,120.				OSPISF, FYB, WYDNRF, SOAR

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(1) CHINESE INFORMATION & SERVICE CENTER 611 S LANE ST SEATTLE, WA 98104-2939	23-7438529	501(C)(3)	148,958.				BSK
(2) CIELO PROJECT RADIO RANCH 1601 NORTH ST SE OLYMPIA, WA 98501-3666	91-1728671	501(C)(3)	50,000.				WYDNRF
(3) CITY OF RENTON 1055 S GRADY WAY RENTON, WA 98057-3232	91-6001271	MUNICIPALITY	174,005.				BSK
(4) CLOTHES FOR KIDS 16725 52ND AVE W STE B	91-1345075	501(C)(3)	19,000.				WYDNRF
(5) COALITION FOR REFUGEES FROM BURMA 1265 S MAIN ST STE 309	27-1458930	501(C)(3)	68,782.				BSK, SOAR
(6) COCOON HOUSE 3530 COLBY AVE STE 1 EVERETT, WA 98201-5111	91-1497667	501(C)(3)	19,000.				WYDNRF
(7) COMMUNITIES IN SCHOOLS OF BENTON-FR 415 WRIGHT AVE RICHLAND, WA 99352-3617	81-0846103	501(C)(3)	46,000.				WYDNRF
(8) COMMUNITIES IN SCHOOLS OF KENT PO BOX 62 KENT, WA 98035-0062	91-1523924	501(C)(3)	30,000.				WYDNRF
(9) COMMUNITIES IN SCHOOLS OF LAKEWOOD 10828 GRAVELLY LAKE DR SW STE 104	91-1732922	501(C)(3)	40,000.				WYDNRF
(10) COMMUNITIES IN SCHOOLS OF WASHINGTON 1010 S 336TH ST STE 205	91-1541026	501(C)(3)	24,000.				WYDNRF
(11) COMMUNITIES IN SCHOOLS OF WHATCOM COUNTY PO BOX 6071 BELLINGHAM, WA 98227-6071	64-0956619	501(C)(3)	11,000.				WYDNRF
(12) COMMUNITY DAY SCHOOL ASSOC (DBA LAUNCH) 5950 6TH AVE S STE 109	91-0987650	C CORPORATI	30,000.				WYDNRF

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Schedule I (Form 990) 2021

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(1) COMMUNITY FOR YOUTH 1225 S WELLER ST STE 320	52-1494505	501(C)(3)	10,000.				OSPISF
(2) COMMUNITY HOUSE ON BROADWAY 1105 BROADWAY ST LONGVIEW, WA 98632-3830	94-3067129	501(C)(3)	50,000.				WYDNRF
(3) COMMUNITY RESOURCE GROUP 402 N 4TH ST YAKIMA, WA 98901-2470	91-2090689	501(C)(3)	35,000.				WYDNRF
(4) COMMUNITY YOUTH SERVICES 711 STATE AVE NE OLYMPIA, WA 98506-3984	91-0859922	501(C)(3)	45,000.				WYDNRF
(5) COMPREHENSIVE LIFE RESOURCES 1305 TACOMA AVE S STE 201	91-0854239	501(C)(3)	40,000.				WYDNRF
(6) CONCERNED CITIZENS 945 S FORKS AVE FORKS, WA 98331-9173	91-1156809	501(C)(3)	20,000.				WYDNRF
(7) CORE HEALTH 748 14TH AVE LONGVIEW, WA 98632-2315	82-2081669	501(C)(3)	50,000.				WYDNRF
(8) COUSIN COLLECTIVE 4412 S ALASKA ST TACOMA, WA 98418-1511	86-2451667	501(C)(3)	18,000.				OSPISF
(9) CRISIS CONNECTIONS 2901 3RD AVE STE 100 SEATTLE, WA 98121-1037	91-0773187	501(C)(3)	10,000.				WYDNRF
(10) CULTURESEED 37 NESTOR PEAK RD	20-3027110	501(C)(3)	66,000.				OSPISF, WYDNRF
(11) CUP OF COOL WATER 1106 W 2ND AVE SPOKANE, WA 99201-4506	91-1761708	501(C)(3)	10,000.				WYDNRF
(12) DEGREES OF CHANGE 1102 COMMERCE ST STE 400	45-3035382	501(C)(3)	20,000.				WYDNRF

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46-0809713

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(1) DELRIDGE NEIGHBORHOODS DEV ASSOC 4408 DELRIDGE WAY SW SEATTLE, WA 98106-1347	91-1741016	501(C)(3)	10,000.				OSPISF
(2) DIASPORA FAMILY HEALING NETWORK 24323 106TH PL SE KENT, WA 98030-5409	20-8655418	501(C)(3)	18,000.				OSPISF
(3) DOMESTIC VIOLENCE SERVICES OF BENTON AND 3311 W CLEARWATER AVE STE C140	87-0704852	501(C)(3)	13,000.				WYDNRF
(4) EARLY READING INTERVENTION PROGRAM PO BOX 782 EASTSOUND, WA 98245-0782	91-1276459	501(C)(3)	10,000.				WYDNRF
(5) EAST AFRICAN COMMUNITY SERVICES (V) 7050 32ND AVE S SEATTLE, WA 98118-3502	91-2138852	501(C)(3)	177,680.				BSK, SOAR
(6) EASTSIDE COMMUNITY CHURCH 4420 E PORTLAND AVE TACOMA, WA 98404-4666	91-1007202	501(C)(3)	10,000.				OSPISF
(7) EASTSIDE KYOKUSHIN 17229 NE 134TH PL REDMOND, WA 98052-1225	51-0661385	C CORP	26,000.				WYDNRF
(8) EMPOWERING STRIDES 13525 LOST LAKE RD SNOHOMISH, WA 98296-7863	47-5182998	501(C)(3)	10,000.				WYDNRF
(9) EMPOWERING YOUTH AND FAMILIES OUTREACH 8172 RAINIER AVE S SEATTLE, WA 98118-4447	02-0553368	501(C)(3)	131,338.				BSK, OSPISF
(10) EVERETT SCHOOL DISTRICT 3900 BROADWAY EVERETT, WA 98201-5033	91-6001542	GOVERNMENT	25,000.				RSIP
(11) EXPERIENCE LEARNING COMMUNITY 325 5TH AVE N SEATTLE, WA 98109-4630	91-1626784	501(C)(3)	20,000.				WYDNRF
(12) FAB-5 1120 S 11TH ST TACOMA, WA 98405-4017	91-2138554	501(C)(3)	40,000.				WYDNRF

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(1) FABLAB NONPROFIT 1938 MARKET ST TACOMA, WA 98402-3108	82-4619891	501(C)(3)	6,000.				WYDNRF
(2) FAMILY LEARNING CENTER 505 S OLYMPIA ST APT B5	46-3000858	501(C)(3)	10,000.				OSPISF, WYDNRF
(3) FAMILY PROMISE OF SKAGIT COUNTY 1006 WICKER RD SEDRO WOOLLEY, WA 98284-1316	46-2556043	501(C)(3)	11,000.				WYDNRF
(4) FEDERAL WAY SCHOOL DISTRICT 33330 8TH AVE S FEDERAL WAY, WA 98003-6325	91-6001624	GOVERNMENT	65,000.				RSIP
(5) FILIPINO COMMUNITY OF SEATTLE 5740 MARTIN LUTHER KING JR WAY S	91-6055858	501(C)(3)	123,047.				BSK
(6) FINANCIAL BEGINNINGS WASHINGTON PO BOX 58032 TUKWILA, WA 98138-1032	81-4631680	501(C)(3)	21,000.				WYDNRF
(7) FIRST BAPTIST COMUNIDAD CRISTIANA 112 N PIERCE AVE YAKIMA, WA 98902-2613	91-0567734	501(C)(3)	29,000.				OSPISF
(8) FIRST FIVE YEARS & BEYOND 302 W HARRISON ST STE 101	47-4257834	501(C)(3)	18,000.				OSPISF
(9) FOUNDATION FOR ACADEMIC ENDEAVORS 2727 E COLLEGE WAY	47-4347441	501(C)(3)	31,000.				OSPISF, WYDNRF
(10) FOUNDATION FOR EDMONDS SCHOOL DISTRICT 20420 68TH AVE W LYNNWOOD, WA 98036-7400	91-1296816	501(C)(3)	15,000.				WYDNRF
(11) FOUNDATION FOR SUSTAINABLE COMMUNITY DBA 10 108TH ST SE EVERETT, WA 98208-7079	20-2112828	501(C)(3)	18,000.				OSPISF
(12) FOUNDATION FOR YOUTH RESILIENCY AND ENGAG PO BOX 3907 OMAK, WA 98841-3907	85-1201630	501(C)(3)	16,000.				OSPISF

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(1) FOURTH PLAIN FORWARD 2516 E FOURTH PLAIN BLVD	82-2923189	501(C)(3)	18,000.				OSPISF
(2) FRIENDS OF THE CHILDREN OF SW WASHINGTON 6603 IDAHO ST VANCOUVER, WA 98661-7417	85-1261131	501(C)(3)	32,000.				WYDNRF
(3) GARDEN-RAISED BOUNTY (AKA GRUB) PO BOX 7821 OLYMPIA, WA 98507-7821	91-1594312	501(C)(3)	26,000.				OSPISF, WYDNRF
(4) GEEKING OUT KIDS OF COLOR 605 SW 108TH ST SEATTLE, WA 98146-2229	83-1597755	501(C)(3)	125,797.				BSK
(5) GIRLS HEARTS ON FIRE 1102 A ST STE 428 TACOMA, WA 98402-5011	90-1035221	501(C)(3)	10,000.				WYDNRF
(6) GLACIER PEAK INSTITUTE 1405 EMENS AVE N DARRINGTON, WA 98241-9502	81-2374247	501(C)(3)	10,000.				WYDNRF
(7) GLOBAL VISIONARIES 2524 16TH AVE S SEATTLE, WA 98144-5104	71-0872239	501(C)(3)	30,000.				WYDNRF
(8) GORGE MAKERSPACE 32 NE PIONEER PL	91-0793062	501(C)(3)	7,000.				WYDNRF
(9) GRAYS HARBOR YOUTH WORKS 410 N H ST ABERDEEN, WA 98520-4011	47-1881152	501(C)(3)	11,000.				WYDNRF
(10) GREAT BEND CENTER FOR MUSIC PO BOX 501 UNION, WA 98592-0501	82-1699863	C CORPORATI	50,000.				WYDNRF
(11) HANDS ON CHILDREN'S MUSEUM 414 JEFFERSON ST NE OLYMPIA, WA 98501-1124	91-1405065	501(C)(3)	30,000.				WYDNRF
(12) HEARTSTRIDES THERAPEUTIC HORSEMANSHIP 3500 85TH LN SW OLYMPIA, WA 98512-7504	27-3559358	501(C)(3)	20,000.				OSPISF, WYDNRF

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(1) HERITAGE UNIVERSITY 3240 FORT RD TOPPENISH, WA 98948-9562	91-1160585	501(C)(3)	40,000.				WYDNRF
(2) HEROES HOMESTEAD 4779 GIBSON DAHL RD CLAYTON, WA 99110-9720	82-5063004	501(C)(3)	10,000.				WYDNRF
(3) HEY MENTOR 2725 SW MACARTHUR LN SEATTLE, WA 98126-3137	82-1850037	501(C)(3)	10,000.				WYDNRF
(4) HIGHLINE SCHOOL DISTRICT 15675 AMBAUM BLVD SW BURIEN, WA 98166-2523	91-6001631	GOVERNMENT	40,000.				RSIP
(5) HOUSING HOPE 5830 EVERGREEN WAY EVERETT, WA 98203-3748	94-3060709	C CORPORATI	19,000.				WYDNRF
(6) HUTTON SETTLEMENT 422 W RIVERSIDE AVE STE 931	91-0564969	501(C)(3)	24,000.				WYDNRF
(7) ICNA RELIEF USA PROGRAMS 6721 MARTIN LUTHER KING JR WAY S STE B	04-3810161	501(C)(3)	18,000.				WYDNRF
(8) ICTC YOUTH DEVELOPMENT PROGRAMS 2900 BOMBING RANGE RD	91-1142383	501(C)(3)	36,000.				OSPISF, WYDNRF
(9) IF YOU COULD SAVE JUST ONE 4420 N CINCINNATI ST SPOKANE, WA 99207-3100	82-4898269	501(C)(3)	27,000.				OSPISF, WYDNRF
(10) IMAGINATION STATION CONNELL PO BOX 475 CONNELL, WA 99326-0475	85-1059389	501(C)(3)	10,000.				OSPISF
(11) IMAGINE CHILDREN'S MUSEUM 1502 WALL ST EVERETT, WA 98201-4008	94-3153591	501(C)(3)	10,000.				WYDNRF
(12) IMMIGRANT GUIDE 15907 ASH WAY UNIT D612	83-3303032	501(C)(3)	20,000.				WYDNRF

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
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Department of the Treasury
Internal Revenue Service

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Name of the organization

Employer identification number

SCHOOL'S OUT WASHINGTON

46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) INDIA ASSOCIATION OF WESTERN WASHINGTON PO BOX 404 BELLEVUE, WA 98009-0404	91-1268802	501(C)(3)	20,000.				WYDNRF
(2) INSTITUTE FOR SYSTEMS BIOLOGY (V) 401 TERRY AVE N STE 103	91-2003593	501(C)(3)	30,000.				WYDNRF
(3) INTEGRATION FAMILY SERVICES 687 STRANDER BLVD BLDG C	85-1894964	501(C)(3)	18,000.				OSPISF
(4) INTERFAITH HOSPITALITY NETWORK DBA 904 E HARTSON AVE SPOKANE, WA 99202-2338	91-1707988	501(C)(3)	24,000.				WYDNRF
(5) IRAQI COMMUNITY CENTER OF WASHINGTON 10610 SE KENT KANGLEY RD STE 204	61-1729234	501(C)(3)	100,300.				BSK, SOAR
(6) IURBAN TEEN 2100 LAKE WASHINGTON BLVD N APT A102	46-5015461	501(C)(3)	31,000.				OSPISF, WYDNRF
(7) JACK STRAW FOUNDATION 4261 ROOSEVELT WAY NE	91-0776606	501(C)(3)	18,000.				WYDNRF
(8) KANDELIA 3829B S EDMUNDS ST # 9	91-1122532	501(C)(3)	130,000.				BSK
(9) KENNEWICK SCHOOL DISTRICT 1000 W 4TH AVE KENNEWICK, WA 99336-5533	91-6001557	GOVERNMENT	40,000.				RSIP
(10) KENT SCHOOL DISTRICT 12033 SE 256TH ST KENT, WA 98030-6643	91-6001646	GOVERNMENT	97,500.				RSIP
(11) KENT YOUTH AND FAMILY SERVICES 232 2ND AVE S STE 201 KENT, WA 98032-5862	23-7090029	501(C)(3)	164,752.				BSK, HELO
(12) KIDSQUEST CHILDREN'S MUSEUM 1116 108TH AVE NE BELLEVUE, WA 98004-4321	91-1828830	501(C)(3)	42,367.				BSK

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**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

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SCHOOL'S OUT WASHINGTON

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) KOREAN COMMUNITY SERVICE CENTER 22727 HIGHWAY 99 STE 212	27-1518314	501(C)(3)	10,000.				WYDNRF
(2) KOREAN WOMEN'S ASSOCIATION 123 E 96TH ST TACOMA, WA 98445-2001	91-1066806	501(C)(3)	20,000.				WYDNRF
(3) K-SCHOOL 2021 S 260TH ST DES MOINES, WA 98198-9025	26-3139529	501(C)(3)	10,000.				WYDNRF
(4) LASER CHILDCARE 3311 NE 60TH ST SEATTLE, WA 98115-7318	91-1244816	501(C)(3)	30,000.				WYDNRF
(5) LATINO COMMUNITY FUND OF WA STATE PO BOX 30669 SEATTLE, WA 98113-0669	20-5987399	501(C)(3)	34,000.				OSPISF, WYDNRF
(6) LATINO EDUCATIONAL ACHIEVEMENT PROJECT 1040 S HENDERSON ST SEATTLE, WA 98108-4720	91-1020139	501(C)(3)	29,000.				WYDNRF
(7) LATINO EDUCATIONAL TRAINING INSTITUTE 6605 202ND ST SW STE 300	75-3252857	501(C)(3)	10,000.				WYDNRF
(8) LEVEL THE FIELD SPORTS 5608 17TH AVE NW # 665	83-2982652	501(C)(3)	20,000.				WYDNRF
(9) LIFE ENRICHMENT GROUP 5203 37TH AVE S SEATTLE, WA 98118-6115	65-1278853	501(C)(3)	65,733.				BSK
(10) LIFE ENRICHMENT GROUP-EYFO 8172 RAINIER AVE S SEATTLE, WA 98118-4447	02-0553368	501(C)(3)	65,733.				BSK
(11) LIVING WELL KENT 10605 SE 240TH ST # 232 KENT, WA 98031-4903	81-4451307	501(C)(3)	72,886.				BSK
(12) LOPEZ ISLAND FAMILY RESOURCE CENTER PO BOX 732 LOPEZ ISLAND, WA 98261-0732	91-1919212	501(C)(3)	19,000.				WYDNRF

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Schedule I (Form 990) 2021

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(Form 990)**

**Grants and Other Assistance to Organizations,
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) LOWER COLUMBIA SCHOOL GARDENS PO BOX 785 LONGVIEW, WA 98632-7513	46-4549009	501(C)(3)	50,000.				WYDNRF
(2) MADRES DE CASINO RD 14 E CASINO RD STE D EVERETT, WA 98208-2628	91-6053563	501(C)(3)	13,000.				WYDNRF
(3) MARVIN THOMAS MEMORIAL FUND 1833 S DEARBORN ST SEATTLE, WA 98144-2903	91-2032294	501(C)(3)	10,000.				WYDNRF
(4) MARY'S PLACE DBA MARI'S PLACE FOR THE ART 2321 HOYT AVE EVERETT, WA 98201-2816	45-3411935	501(C)(3)	10,000.				WYDNRF
(5) MENDING WINGS PO BOX 324 WAPATO, WA 98951-0324	20-4312928	C CORP	71,000.				OSPISF, WYDNRF
(6) METHOW ARTS ALLIANCE PO BOX 723 TWISP, WA 98856-0723	91-1207629	501(C)(3)	24,000.				WYDNRF
(7) METRO AQUATICS BOOSTERS 6817 27TH ST W TACOMA, WA 98466-5211	80-0869493	501(C)(3)	40,000.				WYDNRF
(8) MIRACLES AND MEMORIES ACADEMY 123 N BLAKELEY ST MONROE, WA 98272-1824	82-3398837	C CORPORATI	10,000.				WYDNRF
(9) MISSION AFRICA 1020 30TH ST NE AUBURN, WA 98002-2451	76-0843150	501(C)(3)	10,000.				WYDNRF
(10) MOUNTLAKE TERRACE ELEMENTARY PARENT TEACH 22001 52ND AVE W	91-1255669	501(C)(3)	10,000.				WYDNRF
(11) MT ADAMS SCHOOL DISTRICT 621 SIGNAL PEAK RD WHITE SWAN, WA 98952	91-0761272	PUBLIC SCHO	6,000.				FYB
(12) MULTICULTURAL CHILD AND FAMILY HOPE CENTE 2021 S 19TH ST TACOMA, WA 98405-2920	35-2266626	501(C)(3)	40,000.				WYDNRF

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) NATIVE HORSEMANSHIP YOUTH PROGRAM 21487 ORCA DR NE POULSBO, WA 98370-7897	37-1705745	501(C)(3)	10,000.				WYDNRF
(2) NEIGHBORHOOD HOUSE INC 1225 S WELLER ST STE 510	91-0568305	501(C)(3)	211,512.				BSK, SOAR, HELO
(3) NEW LIFE YOUTH FOUNDATION 1239 120TH AVE NE STE B	83-1287774	501(C)(3)	10,000.				WYDNRF
(4) NORTHEAST YOUTH AND FAMILY SERVICES 19 E QUEEN AVE SPOKANE, WA 99207-1418	84-5038627	501(C)(3)	24,000.				WYDNRF
(5) NORTHEAST YOUTH CENTER 3004 E QUEEN AVE SPOKANE, WA 99217-6164	71-0886315	501(C)(3)	24,000.				WYDNRF
(6) NORTHWEST ALLIANCE FOR COLLEGE ACCESS DBO 1799 SLEEPY HOLLOW LN	27-2997677	501(C)(3)	13,000.				WYDNRF
(7) NORTHWEST ASSOCIATION FOR BLIND ATHLETES PO BOX 61489 VANCOUVER, WA 98666-1489	26-0244283	501(C)(3)	51,000.				OSPISF, WYDNRF
(8) NORTHWEST LANGUAGE & CULTURAL CENTER 1804 SCOTT RD STE 104	90-0394162	501(C)(3)	10,000.				WYDNRF
(9) NORTHWEST LEARNING AND ACHIEVEMENT GROUP 112 W 3RD ST WAPATO, WA 98951-1329	91-1949052	501(C)(3)	34,000.				WYDNRF
(10) NORTHWEST YOUTH CORPS 2621 AUGUSTA ST EUGENE, OR 97403-3219	93-0818160	501(C)(3)	30,000.				WYDNRF
(11) NORTHWEST YOUTH SERVICES 108 PROSPECT ST BELLINGHAM, WA 98225-4402	91-0970561	501(C)(3)	10,000.				WYDNRF
(12) OASIS YOUTH CENTER (V) 2215 PACIFIC AVE TACOMA, WA 98402-3005	91-1385245	501(C)(3)	10,000.				OSPISF

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(1) ODYSSEY YOUTH CENTER 1121 S PERRY ST SPOKANE, WA 99202-3524	91-2045932	501(C)(3)	10,000.				OSPISF
(2) OIC OF WASHINGTON/HENRY BEAUCHAMP COMMUNI 815 FRUITVALE BLVD YAKIMA, WA 98902-1467	91-0873024	501(C)(3)	62,000.				OSPISF, WYDNRF
(3) ONEAMERICA 1225 S WELLER ST STE 430	20-0384893	501(C)(3)	8,000.				WYDNRF
(4) ONEWORLD NOW! {V} 220 2ND AVE S STE 102	75-2981831	501(C)(3)	24,000.				WYDNRF
(5) OPEN DOORS FOR MULTICULTURAL FAMILIES (V) 24437 RUSSELL RD STE 110	27-1206272	501(C)(3)	157,500.				BSK
(6) OPERATION HEALTHY FAMILY 631 S RICHARD ALLEN CT	45-3903048	501(C)(3)	12,000.				WYDNRF
(7) OPPORTUNITY CENTER OF ORTING INC PO BOX 1423 ORTING, WA 98360-1423	91-2112227	501(C)(3)	10,000.				WYDNRF
(8) PACIFIC BALLROOM DANCE 1604 15TH ST SW STE 109	33-1076075	501(C)(3)	10,000.				WYDNRF
(9) PACIFIC ISLANDER COMMUNITY ASSOCIATION OF 643 S 150TH ST BURIEN, WA 98148-1105	84-2470123	501(C)(3)	30,000.				WYDNRF
(10) PACIFIC LUTHERAN UNIVERSITY 12180 PARK AVE S TACOMA, WA 98447-0003	91-0565571	501(C)(3)	55,000.				OSPISF, WYDNRF
(11) PACIFIC NORTHWEST PARKOUR ASSOCIATION 9549 LAKE SHORE BLVD NE	26-1856160	501(C)(3)	10,000.				WYDNRF
(12) PACIFICA FOUNDATION SEATTLE 15127 NE 24TH ST # 763	33-1030043	501(C)(3)	31,000.				OSPISF, WYDNRF

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(1) PAGE AHEAD CHILDREN'S LITERACY PROGRAM 1130 NW 85TH ST SEATTLE, WA 98117-3318	91-1600084	501(C)(3)	30,000.				WYDNRF
(2) PALOUSE DISCOVERY SCIENCE CENTER 950 NE NELSON CT PULLMAN, WA 99163-5608	82-0523927	501(C)(3)	17,000.				WYDNRF
(3) PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405-3438	91-1746986	501(C)(3)	38,000.				WYDNRF
(4) PIZZA KLATCH 312 4TH AVE E OLYMPIA, WA 98501-1107	45-5534793	501(C)(3)	45,000.				WYDNRF
(5) PROYECTO MOLE - LEADERSHIP FOUNDATIONS 902 MARKET ST TACOMA, WA 98402-3609	25-1741353	501(C)(3)	12,000.				WYDNRF
(6) PUGET SOUND VOYAGING SOCIETY DBA COMMUNIT 42 N WATER ST PORT HADLOCK, WA 98339-8706	80-0337485	501(C)(3)	13,000.				OSPISF
(7) R. MERLE PALMER MINORITY SCHOLARSHIP FOUN 2141 S J ST TACOMA, WA 98405-3829	91-1742581	501(C)(3)	40,000.				WYDNRF
(8) RAIN CITY ROCK CAMP FOR GIRLS 117 E LOUISA ST PMB 445	94-3455872	501(C)(3)	24,000.				WYDNRF
(9) RAINIER ATHLETES 3120 139TH AVE SE FL 5	81-3280079	501(C)(3)	21,000.				OSPISF
(10) READINESS TO LEARN 723 CAMANO AVE LANGLEY, WA 98260-9577	91-1864751	501(C)(3)	11,000.				WYDNRF
(11) RED-TAILED HAWKS CHAPTER, BLACK PILOTS OF PO BOX 1403 MUKILTEO, WA 98275-1403	86-0852905	501(C)(3)	10,000.				WYDNRF
(12) RISE UP ACADEMY 11229 4TH AVE W EVERETT, WA 98204-4928	91-1872298	501(C)(3)	44,000.				OSPISF, WYDNRF

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(1) ROCHESTER ORGANIZATION OF FAMILIES (ROOF) PO BOX 312 ROCHESTER, WA 98579-0312	77-0620956	C CORPORATI	15,000.				OSPISF
(2) ROD'S HOUSE 204 S NACHES AVE YAKIMA, WA 98901-2910	36-4659738	501(C)(3)	46,000.				WYDNRF
(3) RYAN'S HOUSE FOR YOUTH 19777 STATE ROUTE 20	27-2113343	501(C)(3)	19,000.				WYDNRF
(4) SALISH SCHOOL OF SPOKANE 4125 N MAPLE ST SPOKANE, WA 99205-1353	27-1126478	501(C)(3)	42,000.				OSPISF, WYDNRF
(5) SEATTLE ART MUSEUM 1300 1ST AVE SEATTLE, WA 98101-2003	91-0640788	501(C)(3)	26,000.				WYDNRF
(6) SEATTLE GOODWILL INDUSTRIES 700 DEARBORN PL S SEATTLE, WA 98144-2736	91-0568708	501(C)(3)	10,000.				WYDNRF
(7) SEATTLE PARKS AND RECREATION PO BOX 94626 SEATTLE, WA 98124-6926	91-6001275	MUNICIPAL C	166,902.				BSK
(8) SECOND CHANCE OUTREACH 19360 MILLTOWN RD	832-44-5419	SMLLC	15,000.				OSPISF
(9) SENECA FAMILY OF AGENCIES 8945 GOLF LINKS RD OAKLAND, CA 94605-4124	94-2971761	501(C)(3)	10,000.				WYDNRF
(10) SHARED HOUSING SERVICES 901 S 11TH ST TACOMA, WA 98405-4533	91-1557248	501(C)(3)	10,000.				WYDNRF
(11) SHELTON YOUTH CONNECTION 123 S 2ND ST SHELTON, WA 98584-3528	82-3875497	501(C)(3)	50,000.				WYDNRF
(12) SKATE LIKE A GIRL 305 HARRISON ST SEATTLE, WA 98109-4623	26-2500555	501(C)(3)	15,000.				WYDNRF

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

SCHOOL'S OUT WASHINGTON

46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SKILLS INC. 715 30TH ST NE AUBURN, WA 98002-2479	91-0816065	501(C)(3)	10,000.				WYDNRF
(2) SOMALI BANTU COMMUNITY SERVICE OF WASHING 1621 CENTRAL AVE S STE N	81-4091613	501(C)(3)	10,000.				WYDNRF
(3) SOMALI COMMUNITY SERVICES OF SEATTLE 8810 RENTON AVE S SEATTLE, WA 98118-4919	91-1746056	CORPORATION	21,000.				OSPISF
(4) SOMALI YOUTH AND FAMILY CLUB {V} 19550 INTERNATIONAL BLVD STE 106	27-0377330	501(C)3	91,077.				BSK
(5) SOUND CHILD CARE SOLUTIONS 1225 S WELLER ST STE 200	02-0551791	501(C)(3)	20,000.				WYDNRF
(6) SOUTHWEST YOUTH AND FAMILY SERVICES 4555 DELRIDGE WAY SW SEATTLE, WA 98106-1379	91-1117862	501(C)(3)	174,773.				BSK, SOAR, HELO
(7) SPACE BETWEEN 140 LAKESIDE AVE STE A-64	81-4546023	SMLLC	10,000.				WYDNRF
(8) SPOKANE CENTRAL 1214 W SUMMIT PKWY SPOKANE, WA 99201-7003	46-5367850	501(C)(3)	12,000.				WYDNRF
(9) SPOKANE EASTSIDE REUNION ASSOCIATION 3001 E 5TH AVE SPOKANE, WA 99202-4183	45-2464484	501(C)(3)	10,000.				WYDNRF
(10) SPOKANE SCHOOL DISTRICT #81 200 N BERNARD ST SPOKANE, WA 99201-0282	91-6001582	GOVERNMENT	58,278.				RSIP
(11) SPOKANE YOUTH FOR CHRIST 601 W RIVERSIDE AVE STE 1017	91-0880433	501(C)(3)	16,000.				WYDNRF
(12) SPORTS IN SCHOOLS 1211 E DENNY WAY # B7	27-1754999	501(C)(3)	12,000.				WYDNRF

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

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SCHOOL'S OUT WASHINGTON

Employer identification number

46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ST JAMES FAMILY CENTER 1134 COLUMBIA ST CATHLAMET, WA 98612-9535	91-1161548	501(C)(3)	15,000.				WYDNRF
(2) ST PASCHAL EDUCARE 2521 N PARK RD	91-2099252	501(C)(3)	12,000.				WYDNRF
(3) STEM PATHS INNOVATION NETWORK (V) 3250 AIRPORT WAY S STE 742	47-4188543	C CORPORATI	55,066.				BSK
(4) STONEWALL YOUTH PO BOX 7283 OLYMPIA, WA 98507-7181	94-3202727	501(C)(3)	14,000.				WYDNRF
(5) TACOMA ART MUSEUM (V) 1701 PACIFIC AVE TACOMA, WA 98402-3214	91-0697444	501(C)(3)	30,000.				WYDNRF
(6) TACOMA URBAN LEAGUE (V) 2550 YAKIMA AVE TACOMA, WA 98405-3800	91-0826302	501(C)(3)	8,000.				OSPISF
(7) TACOMA URBAN PERFORMING ARTS CENTER 1301 MARTIN LUTHER KING JR WAY STE B	82-0972418	501(C)(3)	57,000.				OSPISF, WYDNRF
(8) TEAM CHILD 1225 S WELLER ST STE 420	91-1930194	501(C)(3)	30,000.				WYDNRF
(9) TEAM NATURALEZA 2803 NW EMPIRE AVE	20-5844470	501(C)(3)	9,000.				WYDNRF
(10) TEAM REDEEMED LIFE CENTER 703 CENTRAL AVE S KENT, WA 98032-6108	85-3322022	501(C)(3)	10,000.				WYDNRF
(11) TEENAGERS PLUS 1305 S 312TH ST STE 101	47-4256136	501(C)(3)	21,000.				OSPISF
(12) THE 5TH AVENUE THEATRE 1326 5TH AVE STE 735 SEATTLE, WA 98101-2640	91-1087612	501(C)(3)	22,000.				WYDNRF

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

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Employer identification number

SCHOOL'S OUT WASHINGTON

46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) THE ANSWER FOR YOUTH 826 E 1ST ST PORT ANGELES, WA 98362-3607	26-4089958	501(C)(3)	17,000.				WYDNRF
(2) THE ARC OF SPOKANE 320 E 2ND AVE SPOKANE, WA 99202-1402	91-0716160	501(C)(3)	10,000.				WYDNRF
(3) THE ARC OF TRI-CITIES 1455 FOWLER ST RICHLAND, WA 99352-4717	91-6056360	501(C)(3)	46,000.				WYDNRF
(4) THE BENJI PROJECT 1239 TAYLOR ST PORT TOWNSEND, WA 98368-5438	81-2518239	501(C)(3)	27,000.				WYDNRF
(5) THE BRAVE WARRIOR PROJECT 18 N MISSION ST WENATCHEE, WA 98801-2250	81-5217156	501(C)(3)	24,000.				WYDNRF
(6) THE BRIDGE MUSIC PROJECT 2420 12TH AVE SE OLYMPIA, WA 98501-2644	82-1633999	S CORP	10,000.				WYDNRF
(7) THE COMMUNITY FOR THE ADVANCEMENT OF FAMI 766 S MISSION ST WENATCHEE, WA 98801-3052	91-1909072	501(C)(3)	10,000.				WYDNRF
(8) THE GOOD FOOT ARTS COLLECTIVE 4913 S PILGRIM ST SEATTLE, WA 98118-5649	47-4257834	501(C)(3)	7,000.				OSPISF
(9) THE HAWK FOUNDATION FOR RESEARCH & EDUCAT 816 ADAMS ST SE OLYMPIA, WA 98501-1465	83-2157920	501(C)(3)	24,000.				WYDNRF
(10) THE MOCKINGBIRD SOCIETY 2100 24TH AVE S STE 240	91-2051340	501(C)(3)	30,000.				WYDNRF
(11) THE SALVATION ARMY 111 QUEEN ANNE AVE N STE 300	94-1156347	501(C)(3)	49,000.				OSPISF, WYDNRF
(12) THEATRE33 1632 116TH AVE NE STE D	46-4280740	501(C)(3)	10,000.				WYDNRF

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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46-0809713

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) THRIVE YOUTH 604 WILLIAMS CT W EATONVILLE, WA 98328-8014	26-2607043	501(C)(3)	31,000.				WYDNRF
(2) TOGETHER! FOR YOUTH PO BOX 3525 WENATCHEE, WA 98807-3525	94-3197733	C CORPORATI	10,000.				WYDNRF
(3) TRANSFORMATIONS BY OLYMPIC ANGELS 237 TAYLOR ST UNIT 2	84-4233503	501(C)(3)	50,000.				WYDNRF
(4) TRANSFORMATIONS BY SPOKANE ANGELS 15202 E SPRAGUE AVE # 87	27-2087142	501(C)(3)	24,000.				WYDNRF
(5) TRANSITIONS 3128 N HEMLOCK ST SPOKANE, WA 99205-2500	91-1307272	501(C)(3)	13,000.				WYDNRF
(6) TREEHOUSE (V) 2100 24TH AVE S STE 200	91-1425676	501(C)(3)	30,000.				WYDNRF
(7) TRI-CITY CHAPLAINCY 1480 FOWLER ST RICHLAND, WA 99352-4717	91-0913590	C CORPORATI	46,000.				WYDNRF
(8) TRILOGY RECOVERY COMMUNITY 120 E BIRCH ST STE 14	32-0303794	501(C)(3)	46,000.				WYDNRF
(9) TTAWAXT BIRTH JUSTICE CENTER 71 MCKEE RD SELAH, WA 98942-8829	84-2803522	501(C)(3)	46,000.				WYDNRF
(10) TUKWILA SCHOOL DISTRICT 4640 S 144TH ST TUKWILA, WA 98168-4134	91-6001638	SCHOOL DIST	65,000.				RSIP
(11) TULALIP FOUNDATION 8825 34TH AVE NE # L-242	26-0807036	501(C)(3)	10,000.				WYDNRF
(12) UNITED YOUTH MOVEMENT 800 MAC LN SE OLYMPIA, WA 98513-7742	83-4712948	501(C)(3)	29,000.				OSPISF, WYDNRF

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- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) URBAN ARTWORKS 815 SEATTLE BLVD S STE B7	91-1939910	501(C)(3)	18,000.				OSPISF
(2) URBAN FAMILY CENTER ASSOCIATION PO BOX 88064 SEATTLE, WA 98138-2064	27-3962439	501(C)(3)	125,000.				BSK
(3) URBAN NATIVE EDUCATION ALLIANCE 2703 NE 123RD ST SEATTLE, WA 98125-5343	27-4272577	501(C)(3)	20,000.				WYDNRF
(4) VAMOS OUTDOORS PROJECT 1210 ELLIS ST BELLINGHAM, WA 98225-5205	82-5321659	501(C)(3)	30,000.				OSPISF, WYDNRF
(5) VASHON YOUTH & FAMILY SERVICES 20110 VASHON HWY SW VASHON, WA 98070-6026	91-1025994	501(C)(3)	20,000.				WYDNRF
(6) VISION CHURCH 1917 CALIFORNIA ST EVERETT, WA 98201-3602	30-0957833	501(C)(3)	18,000.				OSPISF
(7) WAKULIMA USA 22014 108TH AVE SE KENT, WA 98031-2178	83-3464668	501(C)(3)	10,000.				WYDNRF
(8) WALK AWAY CITY COLLAB - PASSIAN CENTER 330 SW 43RD ST STE K PMB 232	47-1159783	508(C)(1)(A)	140,000.				BSK
(9) WALLA WALLA PUBLIC LIBRARY 238 E ALDER ST WALLA WALLA, WA 99362-1943	91-1104907	501(C)(3)	46,000.				WYDNRF
(10) WASHINGTON KIDS IN TRANSITION 19721 SCRIBER LAKE RD STE B	47-2258133	501(C)(3)	19,000.				WYDNRF
(11) WASHINGTON STATE FAMILY AND COMMUNITY ENG 6628 212TH ST SW STE 204	91-2068909	C CORP	10,000.				WYDNRF
(12) WASHINGTON VOCATIONAL SERVICES 111 SE EVERETT MALL WAY STE C100	51-0192526	501(C)(3)	18,000.				WYDNRF

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- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) WASHINGTON YOUTH SOCCER FOUNDATION 7100 FORT DENT WAY STE 215	81-2750141	501(C)(3)	10,000.				WYDNRF
(2) WENAS MAMMOTH FOUNDATION 2741 S WENAS RD SELAH, WA 98942-9159	46-1964003	501(C)(3)	10,000.				WYDNRF
(3) WHITEWATER AQUATICS MANAGEMENT 606 SW 116TH ST SEATTLE, WA 98146-2270	27-2422684	501(C)(3)	16,000.				WYDNRF
(4) WILD WHATCOM PO BOX 4457 BELLINGHAM, WA 98227-4457	90-0791289	501(C)(3)	9,000.				WYDNRF
(5) WORK FORCE DEVELOPMENT CENTER 11400 AIRPORT RD STE 100	91-1518808	501(C)(3)	10,000.				WYDNRF
(6) WORLD RELIEF SEATTLE 841 CENTRAL AVE N STE 106	23-6393344	501(C)(3)	20,000.				WYDNRF
(7) YAKIMA MUSIC EN ACCION 15 N NACHES AVE STE 10	30-0893939	501(C)(3)	46,000.				WYDNRF
(8) YAKIMA VALLEY FARM WORKERS CLINIC (V) PO BOX 190 TOPPENISH, WA 98948-0190	91-1019392	501(C)(3)	46,000.				WYDNRF
(9) YES OF PEND OREILLE COUNTY 229 N CALISPEL AVE NEWPORT, WA 99156-9703	80-0886113	501(C)(3)	12,000.				WYDNRF
(10) YMCA OF GREATER SEATTLE 909 4TH AVE SEATTLE, WA 98104-1108	91-0482710	501(C)(3)	109,349.				BSK, OSPISF, HELO
(11) YMCA OF PIERCE & KITSAP COUNTIES 4717 S 19TH ST STE 201	91-0565562	501(C)(3)	16,000.				WYDNRF
(12) YMCA OF THE GREATER TRI-CITIES 1234 COLUMBIA PARK TRL	91-0655754	501(C)(3)	46,000.				WYDNRF

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Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) YOUNG SHAKESPEARE WORKSHOP 6523 CALIFORNIA AVE SW PMB 214	20-2660025	501(C)(3)	20,000.				WYDNRF
(2) YOUNG WOMEN EMPOWERED (V) 1143 MARTIN LUTHER KING JR WAY # 136	47-2230647	501(C)(3)	20,000.				WYDNRF
(3) YOUR MONEY MATTERS 12110 SE 312TH ST APT H206	82-3618832	501(C)(3)	20,000.				WYDNRF
(4) YOUTH & FAMILY LINK 907 DOUGLAS ST LONGVIEW, WA 98632-2155	91-0726260	501(C)(3)	25,000.				WYDNRF
(5) YOUTH EXPERIENTIAL TRAINING INSTITUTE 226 SW 171ST ST	27-3193281	501(C)(3)	10,000.				WYDNRF
(6) YOUTH IN FOCUS 2100 24TH AVE S STE 310	91-1821137	CORPORATION	21,000.				WYDNRF
(7) YWCA OF SEATTLE-KING-SNOHOMISH COUNTY 1118 5TH AVE SEATTLE, WA 98101-3001	91-0482890	501(C)(3)	8,000.				WYDNRF
(8) YWCA OLYMPIA 220 UNION AVE SE OLYMPIA, WA 98501-1322	91-0568718	501(C)(3)	36,000.				WYDNRF
(9) ZENO 1404 E YESLER WAY STE 204	20-5570858	501(C)(3)	26,000.				WYDNRF
(10)							
(11)							
(12)							

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Schedule I (Form 990) 2021

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

PART I DESCRIPTION OF PROCEDURE FOR MONITORING USE OF FUNDS:

STAFF MONITOR GRANT COMPLIANCE BASED ON DELIVERABLES SET BY FUNDING SOURCES. SITE VISITS, FISCAL AND NARRATIVE REPORTS ARE REQUIRED TO ENSURE THAT OUTCOMES ARE MET AND FUNDS ARE SPENT ACCORDING TO GRANT REQUIREMENTS.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

PART I DESCRIPTION OF PROGRAM GRANTS:

BSK-BEST STARTS FOR KIDS

FYB-FEED YOUR BRAIN

HELO-HOUSING EDUCATION PROJECT

OSPISF - OSPI SUMMER FUNDING

RSIP-REFUGEE SCHOOL IMPACT PROGRAM

WYDNRF-WASHINGTON YOUTH DEVELOPMENT NONPROFIT RELIEF FUND

SOAR - SOAR

YDEKC-YOUTH DEVELOPMENT EXECUTIVES OF KING COUNTY

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SCHOOL'S OUT WASHINGTON

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Employer identification number

46-0809713

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

BUILDING COMMUNITY SYSTEMS TO SUPPORT QUALITY AFTERSCHOOL, YOUTH
DEVELOPMENT AND SUMMER PROGRAMS FOR WASHINGTON'S CHILDREN AND YOUTH AGES
5 THROUGH YOUNG ADULTHOOD.

FORM 990: PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SUMMER PROGRAMS FOR WASHINGTON'S CHILDREN AND YOUTH AGES 5 THROUGH YOUNG
ADULTHOOD.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

YOUTH DEVELOPMENT EXECUTIVES OF KING COUNTY (YDEKC) IS A COALITION OF
YOUTH-SERVING ORGANIZATIONS WORKING TOGETHER TO IMPROVE OUTCOMES FOR
YOUNG PEOPLE IN OUR REGION. WE ARE BUILDING THE YOUTH DEVELOPMENT FIELD
IN KING COUNTY TO PROVIDE THESE OPPORTUNITIES AND PROMOTE EQUITY. WE DO
THIS THROUGH ADVOCACY, COLLABORATION, AND LEADERSHIP DEVELOPMENT.

FORM 990, PART VI, SECTION A, LINE 8B:

NO COMMITTEES HAVE THE AUTHORITY TO ACT ON THE BEHALF OF THE GOVERNING
BODY.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE COMMITTEE REVIEWS THE FORM 990 BEFORE IT IS FILED AND MAKES
IT AVAILABLE FOR THE FULL BOARD AFTER IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD SIGNS CONFLICT OF INTEREST FORM UPON JOINING BOARD AND ANNUALLY
THEREAFTER. BOARD REVIEWS POTENTIAL CONFLICTS AND TAKES APPROPRIATE
ACTIONS DEPENDING ON NATURE OF CONFLICT. EMPLOYEE HANDBOOK INCLUDES STAFF
CONFLICT OF INTEREST FORM AND ACKNOWLEDGE OF RECEIPT AND UNDERSTANDING OF
HANDBOOK IS SIGNED UPON HIRE.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

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FORM 990, PART VI, SECTION B, LINE 15A

WE USED THE ARCHBRIGHT 2021 WAGE & BENEFIT SURVEY TO BENCHMARK SALARIES FOR EACH POSITION IN THE ORGANIZATION. THE SALARY FOR CEO EFFECTIVE 1/1/2021 WAS \$136,475. THE BOARD APPROVES A BUDGET EACH YEAR FOR A STANDARD SALARY INCREMENT AFTER A SUCCESSFUL PERFORMANCE REVIEW FOR EACH POSITION. IN 2021 THE SALARY INCREMENT FOR ALL STAFF AVERAGED 6.4%.

FORM 990, PART VI, SECTION C, LINE 19:

THE AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST AND THE FORM 990 IS PUBLISHED ON OUR WEBSITE. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE PUBLIC.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSSES ON UNCOLLECTIBLE PLEDGES AND PROGRAM REVENUE: -160